PTO/SB/17 (10-08)

The paperwork Reduction Act of 1995, so person are required to respond to a collection of Information unless it displays a valid DNB control number	Under the Paperwork R	teduction Act of 199	5. no person are rec	uired to	U.S. Patent	and Trade	oved for use through mark Office; U.S. DE ation unless it disolav	PARTMENT OF	COMMERC
FEE TRANSMITTAL FOR FY 2009 Applicant daims small entity status. See 37 CFR 1.27 Applicant daims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (b) 540.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 18-0013 Deposit Account Number 18-0013 Deposit Account Number Rader, Fishman & Grauer PLLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Reader, Fishman & Grauer PLLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee X Credit any overpayments FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (5) Fee (5) Fee (5) Fee (6)									
FEE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (s) 540.00 Attorney Docket No. SON-3073 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) Fee(s) Small Entity Fee(s) Small Entity Fee(s) Small Entity Fee(s) Fe					140/507 540 0			onf. #2507	*
For FY 2009 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2621 TOTAL AMOUNT OF PAYMENT (\$) 540.00 Attorney Docket No. SON-3073	FFF TRANSMITTAL				5 1 0 0000			006	
Application rype Fee (s) Fee (s) Fee (s) Fee (s) Plant 220 110 200 100 100 100 100 10						entor	Mitsutoshi Shinkai		
METHOD OF PAYMENT (check all that apply) Check	For FY 2009								
METHOD OF PAYMENT (check all that apply)	Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2621		
Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number 18-0013 Deposit Account Name Rader, Fishman & Grauer PLLC	TOTAL AMOUNT OF PAYMENT (\$) 540.00				Attorney Docket No. SON-307				
Poposit Account Deposit Account Name Rader, Fishman & Grauer PLLC	METHOD OF PAYM	ENT (check all t	hat apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee (ee(s) under 37 CFR 1.16 and 1.17 X Charge fee(s) indicated below, except for the filling fee (ee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments Charge fee(s) indicated below, except for the filling fee (ee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments Charge fee(s) indicated below, except for the filling fee (ee(s) indicated below, except for the filling fee (e(s) indicated below. except for the filling fee (e(s) indicated below, except for the filling fee (e(s) indicated below. except for the filling fee (e(s) indicated below. except for the filling fee (s) indicated below examile indicated belo	Check Cred	it Card	Ioney Order	Nor	e Other (please ident	ify):		
Charge fee(s) indicated below	X Deposit Account	Deposit Account Numb	oer: 18-0	013	Deposit	Account Nar	ne: Rader, Fishr	nan & Grau	er PLLC
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments	For the above-id	entified deposit	account, the Dire	ector is	hereby authorize	ed to: (che	eck all that apply)		
Tele	x Charge fee	e(s) indicated be	low		Charge	e fee(s) ir	ndicated below, e	xcept for the	filing fee
Small Entity Fee (\$) Fee (\$)				ents of	x Credit	any over	payments		
Papelication Type	FEE CALCULATION								
Application Type	1. BASIC FILING, SEAF	RCH, AND EXAM	INATION FEES	3					
Application Type		FILIN		SEA		EXAM			
Utility	Application Type	Fee (\$)		Fee (\$		Fee (\$)		Fees Pa	aid (\$)
Design 220 110 100 50 140 70						-			
Plant		220							
Reissue	-								
Provisional 220 110 0 0 0 0 0 0 0 0 2. EXCESS CLAIM FEES	Reissue	330	165	540		650	325		
Fee (\$) Fee (\$) Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	Provisional	220		0					
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Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								52	26
Total Claims	Each independent claim over 3 (including Reissues)							220	110
- or HP = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims	Multiple dependent claims							390	195
HP = highest number of total claims paid for, if greater than 20. Indep. Claims - or HP = x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)	Total Claims	Extra Claims	Fee (\$)	Fe	e Paid (\$)	!	Multiple Dependent Clain		
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Non-English Specification, \$130 fee (no small) entity discount)					(, cana ap to a will	Hulliber	· ^	Fees P	
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SUBMITTED BY Registration No. (Attorney/Agent) 40,290 (202) 955-3750 Telephone Signature Name (Print/Type) Christopher M February 22, 2010 Date